

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 193

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POGUE, RICHARD, W., MR.,

Mailing Address 901 LAKESIDE AVE. E.

City
CLEVELANDState
OHZip Code
44114-1163FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JONES DAYOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11A.1733950

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POWERS, PATRICK, , ,

Mailing Address 2764 WOODHAVEN DR.

City
MEDINAState
OHZip Code
44256-8631FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DONLEYS INCOccupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11A.1734068

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRATHER, DONALD, B., ,

Mailing Address 6730 SWAMP ST.

City
HARTVILLEState
OHZip Code
44632-9323FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CUSTOM POLY-BAG, INC./OWNER/Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11A.1734664

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

1500.00

TOTAL This Period (last page this line number only).....▶